

| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 27 | 10-30-73 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral) ... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------|----------|
| Final | |
| Original | |
| 7 | 03 42 |
| 01 | 02 03 04 |
| 11 | ✓ ✓ ✓ |
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| 4 | 0 ✓ |
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| 12 | ✓ = |
| 13 | 0 ✓ |
| 14 | ✓ ✓ |
| 15 | 0 ✓ |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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